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Items of Interest:

Lyme Disease. Lyme disease is a bacterial infection that is spread by ticks. You may develop Lyme disease if you are bitten by an infected tick. If the tick remains attached to the skin for 36 to 48 hours, you are at greater risk for developing the disease. Symptoms include development of a circular rash and flulike symptoms, such as body aches, fatigue, and mild fever. Lyme disease can be cured by antibiotics, as long as the disease is diagnosed and treated at an early stage. To prevent Lyme disease, wear clothing that covers the majority of your body. When outdoors for an extended period of time, check body and clothing for ticks. Remove ticks promptly and contact your physician for medical assistance. For more information, visit <http://www.nlm.nih.gov>

Navy and Marine Corps Medical News

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Comfort Provides Care to Colombians at Buenaventura

By Mass Communication Specialist
2nd Class Brandon Shelandier, USNS
Comfort Public Affairs

BUENAVENTURA, Colombia - Service members and civilians from hospital ship USNS Comfort (T-AH 20) kicked off the first day of humanitarian medical care at Buenaventura Coliseum in Buenaventura Aug. 23.

Buenaventura is one of five sites where service members from the U.S. Navy, Air Force, Public Health Service, Coast Guard, and volunteers from non-government organization Project Hope, will provide medical care and medical education to Colombians.

Treatment started in the morn-

ing as potential patients lined up outside by the hundreds.

"The services we're providing are incredibly valuable to the local people," said Lt. Diana Garcia, medical operations liaison officer for Comfort. Garcia was born in Colombia and has seen how Comfort's mission changes lives.

"They're incredibly grateful for what we are doing here in Colombia. Even if we can't treat something that may be wrong, we offer such a wide variety of services that they can walk away healthier," Garcia said.

Colombians who visit Buenaven-

(Continued on page 3)



SASAMUNGA, Solomon Islands - Lt. Cmdr. Jay Geistkemper checks a patient for cavities as part of the dental civic action program in support of Pacific Partnership Aug. 21. The four-month humanitarian assistance brings a wide variety of medical, dental and engineering assistance to the local population. U.S. Navy photo by Mass Communication Specialist 3rd Class Sean P. Lenahan

Hearing Preservation Aided by Naval Hospital Bremerton's MOHCAV

By Douglas H Stutz, Naval Hospital Bremerton Public Affairs Office

**NAVAL HOSPITAL BREMER-
TON, Wash.** - Audiologists of the Hearing Conversation Department, Naval Branch Health Clinic, Puget Sound Naval Shipyard (PSNS), of Naval Hospital Bremerton, are available at beck and call with the state-of-the-art Mobile Hearing Conservation Audiometric Vehicle (MOHCAV).

According to Cmdr. Glen Roving, Naval Branch Health Clinic Hearing Conservation Department, there are approximately 15 percent Navy-wide, of noise exposed personnel who experience a significant threshold shift in hearing annually.

"While a Sailor does not have the same risk for noise induced hearing loss as a Soldier or Marine who is exposed to weapons fire that

can cause permanent damage, occupational noise induced hearing loss is easily the number one occupational health risk for civilian industrial and military members," said Roving.

In 2006, the Veterans Administration noted 9,621 Navy and 5,489 Marine vets had service-connected hearing impairment, and an additional 11,223 Navy and 9,432 Marines for troubling tinnitus (buzzing or ringing in the ears).

"That is a fairly staggering measure of reduced quality of life and should be of major concern to personnel at all levels of leadership," stated Roving.

Roving, self-labeled as the 'oldest surviving audiologist' still on active duty, and Andy Anderson, MOHCAV senior audio technician, are actively aurally engaged to

lessen those numbers.

"We can do hundreds of tests a month. We are contingent on the needs of the fleet," explained Anderson. "We conduct hearing tests for fleet and ashore units without intrinsic hearing test capabilities throughout the Pacific Northwest. We have a relatively quick test to ensure a person has the ability to hear sound properly and communicate clearly. The entire process is very user friendly and can even help a person by guiding them through the test if needed."

The MOHCAV will be positioned to begin supporting USS Michigan (SSGN 727) at PSNS. With a six-station double walled booth on board, six subjects can be evaluated in approximately 15 to 20 min-

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TRICARE Dental Change Benefits Children with Special Needs

By Loren Barnes and Marsha Childs, Naval Hospital Jacksonville, Fla. Public Affairs

NAVAL HOSPITAL JACKSONVILLE, Fla. - Capt. Margaret Alexander, Naval Hospital Jacksonville, Fla. Pediatric Dentist, provided valuable information which was used by Congress to legislate an important change in the TRICARE dental benefit. This change covers anesthesia services and hospital costs for dental care for patients with developmental, mental, or physical disabilities, and for children age 5 and under.

"When on staff at the Naval Postgraduate Dental School, National Naval Medical Center (NNMC) Bethesda, Md.," Alexander explained, "I was also Specialty Leader for Pediatric Dentistry for the Navy." She said during that time it came to her attention that TRICARE did not pay for the general anesthesia or for the facility fee to have the dental work done. Alexander observed, "This is a sad disparity because if the same child needs her tonsils out, TRICARE will take care of it out in town."

Alexander pointed out, "A segment of our dependent population, those with severe autism, cerebral palsy, epilepsy—these patients really can't be treated for dental disease in your standard dental office. Many of us kept asking the question, 'Why isn't Military Medicine helping out these kids?' It is very heartbreaking to have military families go to Navy and Marine Corp Relief Society to pay for \$4,000 worth of medical bills."

Several organizations had been pushing for changes to fix this problem. And finally, under the National De-

fense Authorization Act of 2007, the expanded benefit was passed into law.

Alexander indicated that the coverage doesn't cover all the family's expenses associated with such treatment but that it does make a dent in the bill. It basically covers the cost of the same-day-surgery suite and payment for the oral surgeon or pediatric dentist doing the work.

A TRICARE Management Activity release announced in December '06 that the change in statute does not include the actual dental services covered through the TRICARE Dental Program and the TRICARE Retiree Dental Program. It does, however, enhance the benefit for military families.

To realize savings under the program parents must submit their bills for reimbursement. Specifics on the implementation of the change are still being written into TRICARE Manuals and dental care services contracts. Larry Coffey, a retired Navy Senior Chief Petty Officer and father of Johnathan, a 12-year-old with a seizure disorder, is one parent who says his family will benefit from the change. He explained, "My son has seizures. Johnathan wouldn't cooperate in the dental chair which is very typical. If you have seizure potential, they have to put you in the operating room for that. They had to give him general anesthesia just to have cavities filled."

Most states require insurance companies to provide coverage for such dental procedures, but TRICARE, the

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EMF Sailor Returns Home to Djibouti to Support U.S. Military Mission

By Mass Communication Specialist
1st Class Mary Popejoy, Combined
Joint Task Force-Horn of Africa Public Affairs

CAMP LEMONIER, Djibouti - It has been 10 years since Hospital Corpsman Khadar Diria last saw his homeland of Djibouti, but now he's back as a U.S. citizen and serving in the Navy as a lab technician for the Expeditionary Medical Force (EMF) at Camp Lemonier.

"I left Djibouti in 1997 in search of higher education, and India was the cheapest, so I went there," said Diria. "I attended Dr. Babasaheb Ambedkar Marathwada University where I received a Bachelor of Science degree in business. Shortly after I completed my education, I entered a green card lottery and won, and I knew my dream of going to the United States was finally going to come true."

When Diria first arrived in the United States, he went to Columbus, Ohio, where his uncle's family lived. He applied to Ohio State University so he could get a similar bachelor's in business that would allow him to meet American standards. That required him to take more classes, which he did, but working and going to school did not work out financially. He decided to take a different route and join the Navy.

"I went to the Navy recruiter, and he said I could pursue education while on active duty. I decided that would be the best way for me to finish up the classes I need to get a degree that [would] meet American standards," said Diria.

In Nov. 2004, Diria entered active duty and went to boot camp and Hospital Corpsman "A" School in Great Lakes, Ill. During his training,

he was able to talk to Navy legal and get information about becoming a U.S. citizen. It was something he wanted to do, so he filled out the paperwork and within three months, Diria was a citizen.

"It was a dream come true," said Diria. "I feel very proud to be a U.S. citizen in the best country in all aspects."

After he completed his initial job training, Diria headed to Virginia for follow-up lab technician training at Thomas Nelson Community College. Diria studied hard to maintain a high grade point average so he could pick his first duty assignment; he wanted to find a way to get back to Djibouti. His studying paid off and he was able to pick Bethesda Naval Hospital, which supports EMF Djibouti.

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Comfort continued...

(Continued from page 1)

tura can receive care in optometry, dentistry, radiology, urology, orthopedics, pediatrics, and gynecology. Some also receive pre-screenings for operations aboard Comfort. All the services are provided inside the coliseum, which is larger than a typical worksite for the Comfort crew.

"There's definitely a lot more room to work in here," said Chief Hospital Corpsman Laura Cain, who helps with workflow organization at the coliseum. "Because of the

room, we're able to control the flow of patients easier by separating the patients in the bleachers by medical needs and picking one from each so it's a steady flow."

Comfort's four-month humanitarian deployment to Latin America and the Caribbean has taken the ship to eight countries – touching the lives of thousands.

"Judging by the reactions of the Colombian people have given me, we're doing a great job," said Air Force Sgt. Sebastian Sanchez. They are very grateful and are telling me we are doing a great job. I agree, but it means more when you hear it from them."

TRICARE continued...

(Continued from page 2)

military health plan, was not covering this care. "I took my son to a hospital in Knoxville, Tenn.," Coffey reported. "We had the dental insurance. I received a \$5,000 bill because it was not a covered benefit. They would pay for the dental procedures, but they said general anesthesia is a medical procedure and nobody would cover it."

Coffey first met Dr. Alexander in 2005 at NNMC Bethesda, when she treated Johnathan at the military medical facility to save the family the costs of this non-covered service. Coffey described Alexander as a phenomenal dentist. "You could say she is my hero. Her efforts helped my son and her efforts are now helping all military families who have a child with a special need.

She had been trying for sometime to push the information up to senior Navy Medicine leadership to make sure this would be a covered benefit. She was very patient, very diligent. She was an advocate for our military families. Johnathan has got a beautiful smile and we owe that smile to Capt. Alexander."

Alexander stressed that while the general anesthesia covered in this new benefit makes dental procedures less stressful for children, parents must also remember that avoiding the necessity for such dental procedures is the best way to safeguard their children's health. She said, "It's a matter of good diet, and good brushing and flossing skills to prevent these problems."

Corpsmen Receive CASEVAC Training

By Lance Cpl. Katie Mathison, II Marine Expeditionary Force

MARINE CORPS BASE CAMP LEJEUNE, N.C. - Pulling together much needed pre-deployment training on short notice can be difficult, but for the sailors of 3rd Battalion, 23rd Marine Regiment, 4th Marine Division, currently attached to 8th Marine Regiment, 2nd Marine Division, it's definitely not impossible.

The corpsmen took part in patient-care and casualty-evacuation sustainment training (CASEVAC) Aug. 9. The course lasted four days and was taught by corpsmen from Special Operations Training Group (SOTG), II Marine Expeditionary Force (II MEF).

"We are covering medical procedures, interventions, patient movement and patient loading and unloading, with an emphasis on CASEVAC," said Hospital Corpsman 1st Class Brian Gerdes, the leading petty officer with SOTG.

The training was divided into three stations. The first station focused on stopping bleeding. The instructors reviewed the uses of different types of tourniquets, from those in individual first-aid kits to field-expedient ones made out of available materials, such as t-shirts. The instructors also demonstrated the proper way to wrap difficult areas, like underneath the arm.

At the second station, instructors showed the corpsmen how to assemble a tri-fold Talon litter and a bi-fold Raven litter, which are the devices used to transport injured Marines. The corpsmen were shown how to assemble them in case there

is only one person available.

At the final station, instructors demonstrated the proper way to load a patient on a litter into a helicopter. The first issues the instructors discussed were the importance of properly fastened straps and careful footing. The corpsmen were then shown the proper way to place litters into the designated slots within the helicopter.

One of the more important lessons involved loading a heavy patient into a helicopter. The corpsmen were taught a technique called "stair-stepping," which involves securing the patient on a lower level on the side of the helicopter, then moving the patient up one side at a time until he is in the proper position.

The training was significant because units attached to the division normally receive CASEVAC training at Marine Corps Air Ground Combat Center Twenty-nine Palms, Calif., exercise Mojave Viper.

"This is the first time we've done it for another group," Gerdes said. "Primarily, we train with the emphasis on Marine Expeditionary Units. The training is generally part of a unit's predeployment training plan. This unit came to us."

Senior Chief Hospital Corpsman Larry Tentinger, the assistant battalion chief and training officer with 3rd Bn., 23rd Marines, said the unit was interested in this type of training as preparation for Mojave Viper, which will offer the corpsmen much more intensive training. The battalion originally contacted Marine Corps Air Station New River,



MARINE CORPS BASE CAMP LEJEUNE, N.C. - Hospital Corpsman 3rd Class Edwin Bringner (lower left) and Rene Nava (kneeling on the right), work on Lt. Cmdr. Michael Wilson (on the litter), the assistant battalion surgeon, as they explain what injuries the casualty has and how they treated him to Hospital Corpsman 1st Class Brian Gerdes Aug. 9. U.S. Marine Corps photo by Lance Cpl. Katie Mathison

N.C., about getting helicopter CASEVAC training. Personnel at the air station informed them of the program here through SOTG.

The class is normally two weeks long, but was condensed into four days to meet the unit's needs.

"They were great," said Lt. Cmdr. Michael Wilson, the assistant battalion surgeon. "They put a great course together for us with little notice."

Hearing continued...

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utes, including input of baseline data and explanation of results.

"Andy is an excellent audio technician," stated Roving. "He has over 22 years experience as a hearing conservation technician here. He is an acknowledged expert in the Defense Occupational and Environmental Health Readiness System (DOEHRS), and frequently consulted by audiologists and other technicians world-wide."

Hearing loss has a tendency to sneak up on a person. Early symptoms of over exposure to noise include tinni-

tus, a blocked/stuffy sensation, and problems understanding speech, particularly in background noise. Noise induced hearing loss begins with a temporary threshold shift that can become permanent with continuing exposure. Because a noise induced hearing loss occurs so gradually and without pain, it can go undetected.

Adults with no recognized hearing impairment would benefit from a screening audiogram every five years in conjunction with wellness programs. Personnel who are in the Hearing Conservation Program (HCP) are checked annually, per OPNAV instruction.

Fun in the Mud to Support Wounded Warriors

By Lance Cpl. Josephh Stahlman,
Marine Forces Special Operations
Command

MARINE CORPS BASE CAMP LEJEUNE, N.C. - To increase awareness and raise support for the injured Marines, Sailors and families of the Wounded Warrior Battalion-East, more than 65 four-person teams, including two teams from Marine Special Operations Advisor Group (MSOAG), U.S. Marine Corps Forces, Special Operations Command (MARSOC), participated in the inaugural Marine Mud Run at Belmont Abbey College at Belmont, N.C., Aug. 4.

"Having fun in the mud and raising money for Wounded Warriors: It doesn't get much better than that," explained Gunnery Sgt. Kent Groves, a team sergeant with MSOAG. "The entire event was a lot of fun and was for a great cause."

The event was open to the public and included military, public safety, corporate, college, community, and military youth group team categories.

"The community has really pulled together for this event," said Monty Monteleone, a retired Marine

and Director of Corporate and Foundation Relations for Belmont Abbey College. "We are glad to have MARSOC out here for such a great cause."

Monteleone, who began co-planning the event more than eight months ago, gathered sponsors and participants from the surrounding area to rally support for the Wounded Warriors.

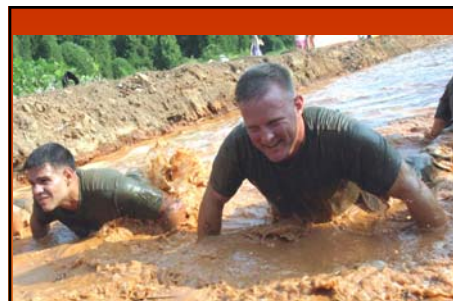
"We gained a lot of support for the run and had over 70 volunteers to help out with the day's events," explained Monteleone.

The mud run teams slogged their way through the mud-soaked 3.8 mile obstacle course that included challenges such as a 50-yard duck walk, push-up and jumping jack stations, sand-bag carries, climbing walls and the crowd's favorite, a "big ol' mud pit."

"Some of the obstacles were pretty tough, but I'd have to say the 50-yard duck walk was the hardest," said Groves.

The final stretch - a 25-yard low crawl - was tough as well.

"Carrying all the extra mud in our pockets and boots weighed us down," Groves explained.



MARINE CORPS BASE CAMP LEJEUNE, N.C. - A Marine, with Marine Special Operations Advisor Group, U.S. Marine Corps Forces, Special Operations Command, does 25 push-ups in the mud during the inaugural Marine Mud Run at Belmont Abbey College, Aug. 4. U.S. Marine Corps photo by Lance Cpl. Josephh Stahlman

Some participants were able to run while others had to walk at times. The participants from each team finished together to show support for a worthy cause.

"I was very impressed with everyone's performance," said Lance Cpl. Ryan Harper, a motor transportation operator who was wounded in Ramadi, Iraq, Feb. 16. "It's great to see how many people still care."

Djibouti continued...

(Continued from page 3)

"I was only at Bethesda for three months when this deployment opportunity came around, so I had to get special permission from my chain of command to deploy because they require personnel to be

on board six months before they can be deployment eligible," said Diria. "I am glad they gave me a waiver because I think my knowledge of Djibouti and my translator abilities will be useful during this deployment."

"His fluency in Somali and Arabic makes visits to the local Djibouti hospital a breeze," said Cmdr. Michael Thomas, officer in charge, EMF Djibouti. "There was no one he could not speak to, even on very technical matters. They were very happy to see a native son working with us in a position of so much trust. HN Diria has additional training in blood banking and manages our transfusion service. He is a critical member of our mass casualty response team."

In addition to helping his command, Diria also makes time for his mother who still lives in Djibouti.

"It's great to be back here because I haven't seen my mother in 10 years. I've missed her," he said. "They are very happy I am home, even if it's only for six months."

He went on to say that whether he's doing his lab technician duties or translating the local language for his counterparts, he's just glad to be here to do great things for the U.S. military and his birthplace.

"I am happy to be here and thankful to the U.S. Navy, my EMF crew and everyone else serving here who are working hard to earn the trust of the Djibouti people so we can help them help Africa," said Diria.



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